

*This portion MUST be returned with your payment to ensure proper credit. THANK YOU*

ACCOUNT BILLED
STEELE, ROBERT

PROJECT NAME
COVE TRAVERTINE

PROJECT ID
S270092

DUE DATE
07/27/2001

ANNUAL FEE
\$ 100

AMOUNT DUE
\$ 100

<input type="checkbox"/> FEE NOT ENCLOSED
Permittee requests an inspection to close out this permit.

TAX ID OR SOCIAL SECURITY #

DIVISION OF OIL GAS AND MINING  
1594 WEST NORTH TEMPLE SUITE 1210  
PO BOX 145801  
SALT LAKE CITY UT 84114-5801

<i>Change of Address</i>	
Contact	_____
Address	_____
_____	_____
_____	_____
State	Zip
Phone	_____

*Please make check payable to:*  
**Division of Oil, Gas and Mining**